QI Basics

# Project Charter

The QI Project Charter organizes the framework of your quality improvement (QI) project and provides a summary for your project team, sponsors, and constituents.

## Introduction

A project charter states the goals, scope, timing, milestones, and team roles and responsibilities for a QI project. The charter may be developed by leadership at an organization and then handed off to the QI team leader. It also may be developed by the QI team leader and then approved by leadership. The charter sets forth the scope of the work and what it so to be accomplished as part of a QI project.

## How to Use

This tool should be completed either by leadership at an organization or by the project leader with input and review by the project team. If it is not developed by leadership, it should have their approval before moving forward.

* Step through each of the fields in the template below and follow the recommended descriptions of what to include in each field.
* After completing the individual fields, review your QI Project Charter as a complete document and confirm that what your QI team will be working on and what they’ll achieve is clearly described. Anyone unfamiliar with your project should be able to read the document and gain an understanding of the project and its scope.

An [example](#example) QI Project Charter is provided at the end of this document for your reference.

## Project Charter

1. Name of project:Enter name of project here.
2. **Problem statement**What is the nature of the work and what are you attempting to accomplish?  
   Elements of your problems statement may include:

* Specific dates in which the problem occurred (months/years)
* Specifics of the problem
* Quantify the problem
* Differences between current and desired/expected performance
* Impact of the problem on patients, organization, staff, etc.

1. **Background**Describe the history and context of your project.
2. **Goals**What improvements are you seeking to achieve?
3. **Timeline**What are the start and completion dates for your project and any major milestone dates?
4. **Team roles and responsibilities**

Enumerate the team members and specific roles. This can be done directly in the charter or utilizing the Team Roles and Responsibilities template, available on the [QI Basics web page](http://www.stratishealth.org/expertise/quality/QIBasics.html), as an addendum to the Charter. Some typical roles are listed below.

* Project sponsor
* Team leader
* Meeting facilitator
* Group contributor
* Data specialist
* Systems specialist
* Scribe / Note taker

1. **Resources required**Itemize specific resources, including staff time, meeting rooms, equipment, etc.
2. **Barriers**Include known barriers at the outset of your project.
3. **Approvals**

List any approvals that you know of, such as managerial approval for staff time devoted to your project.

## Example QI Project Charter

Some standard text about this being an example for reference only – delete if not needed….

1. **Name of project:**   
   NQF0018 Hypertension diagnosis and treatment measure improvement
2. **Problem statement**  
   Our organization is performing at a low rate compared to our peers on our NQF0018. We’d like to focus on improving our performance to get a much higher percentage of our patients properly diagnosed and treated. We know we are below the national and state level on this metric.
3. **Background**  
   We have had off and on success and varying (low) performance rates. We have had visits from American Heart Association consultants and participated in initiatives to improve our processes, but they have always resulted in temporary improvements, especially with staff turnover.
4. **Goals**  
   We will document how we conduct our current blood pressure check process (as a first step) and identify gaps and opportunities for improvement, with a goal of increasing our 45% NQF 0018 measure performance by 10 percentage points at the end of a 3-month test period for our location.
5. **Timeline**  
   We will allow for a month of meeting, planning, and organization time and then launch into a 3-month trial implementation and measurement period where we test blood pressure check process improvements.
6. **Team roles and responsibilities**

We will engage one of our clinicians and owners as a project champion and assign roles to several staff who were educated around hypertension improvement and may have had previous training. We also want to pull in new staff who may have worked at other organizations and can bring some new thinking into our quality improvement team.

1. **Resources required**  
   Primarily, we’ll need to allocate meeting time and pull staff out of their normal encounter and patient care schedules. All other resources (meeting room, IT, etc.) are available and ready for our use.
2. **Barriers**  
   Our primary barrier will be finding time to meet. Secondarily, our challenge may be the culture of adapting to new ways of doing our work and reordering our workflow.
3. **Approvals**

Our project champion will be responsible for gaining approval to engage in this work and determining the amount of staff time we can allocate to meetings. We also need leadership approval to focus on this topic, however, our lower NQF0018 score has been frequently identified in clinician meetings as a target for improvement.